

FEE TRANSMITTAL

Electronic Version v08

Stylesheet Version v08.0

**Title of
Invention**

SHIELDED DOME RESONATOR FOR MR SCANNING OF A CEREBRUM

Application Number :

Date :

First Named Applicant: James S. Tropp

Attorney Docket Number: GEMS 0200 PA

TOTAL FEE AUTHORIZED \$ 910

Patent fees are subject to annual revisions on or about October 1st of each year.

Filing as large entity

BASIC FILING FEE

Fee Description	Fee Code	Amount \$	Fee Paid \$
Utility Filing Fee	1001	750	750
Subtotal For Basic Filing Fees: \$ 750			

EXTRA CLAIM FEES

Fee Description	Extra Claim	Fee Code	Amount \$	Fee Paid \$
Total Claims : 22	2	1202	18	36
Independent Claims : 4	1	1201	84	84
Subtotal For Extra Claims Fees: \$ 120				

ASSIGNMENT FEES

Fee Description	Property Number	Quantity	Fee Code	Amount \$	Fee Paid \$
Recording Each Patent Assignment Per Property Fee	00000000	1	8021	40	40
Subtotal For Additional Fees: \$40					

AUTHORIZED BILLING INFORMATION**The commissioner is hereby authorized to charge indicated fees and credit any overpayments to:**

Deposit account number: 070845

Access Code ****

Deposit name: GE Medical Systems

Deposit authorized name: Jeffrey J. Chapp

Signature: Jeffrey J. Chapp

Date (YYYYMMDD):

2003-09-12

Charge Assignment Fees Required Under 37 C.F.R. Section 1.21 (h).